



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
[www.uspto.gov](http://www.uspto.gov)



Bib Data Sheet

CONFIRMATION NO. 4742

SERIAL NUMBER 09/879,572	FILING OR 371(c) DATE 06/12/2001 RULE	CLASS 424	GROUP ART UNIT 1648	ATTORNEY DOCKET NO. RAMSINGH=1
-----------------------------	--	--------------	------------------------	-----------------------------------

**APPLICANTS**

Arlene I. Ramsingh, Glenmont, NY;  
 Sadia S. Halim, Norwalk, CT;

\*\* CONTINUING DATA \*\*\*\*\* none *SBe*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* none *SBC*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***

08/30/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	NY	14	53	5
Verified and Acknowledged	Examiner's Signature <i>SBe</i> Initials				

**ADDRESS**

1444

**TITLE**

Coxsackievirus B4 expression vectors and uses thereof

FILING FEE RECEIVED 1869	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-----------------------------	---	---